

## The Impact of Intimate Partner Violence on Women's Mental Health in Kenya

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**Abstract :** Adverse mental health consequences are experienced by those that have been touched by Intimate Partner Violence (IPV), whether directly or indirectly. These negative effects are felt not only in the short term but in years to come. It is important to examine the prevalence and co-occurrence of mental disorders in order to provide strategic interventions for women who have experienced IPV. The aim of this study was to examine the prevalence and comorbidity of post-traumatic stress disorder (PTSD), Depression, and Anxiety among women who had experienced intimate Partner violence in two selected informal settlements in Nairobi County, Kenya. Participants were 116 women (15-60 years) selected through purposive and snowball sampling from the low social, economic settlements (Kawangware and Kibera) in Nairobi, Kenya. A social demographic questionnaire and the Woman Abuse Screening Tool (WAST) were used to collect data on intimate partner violence experiences. The PTSD Checklist for DSM-5 (PCL-5), Beck's Depression Inventory, and the Beck's Anxiety Inventory assessed for post-traumatic stress disorder, depression, and anxiety, respectively. Data analysis was conducted using the Statistical Package for Social Sciences (SPSS) version 29, utilizing descriptive and correlation analyses. Findings indicated that the women had undergone various forms of abuse from their intimate partners, which were physical abuse 111(92.5%), sexual abuse 70(88.6%), and verbal abuse 92(93.9%). The prevalence of the mental disorders was PTSD 47(32.4%);  $M = 44.11$ ,  $S.D = 14.67$ , depression was the highest at  $n=131(90.3\%)$ ;  $M=33.37 \pm 9.98$  with the levels of depression having varying prevalence rates where severe depression had the highest representation [moderate:  $n= 35$ ; 24.1%, severe:  $n=69$  (47.6%) and extremely severe:  $n=27(18.6\%)$ ]. Anxiety had the second highest prevalence of  $n=99$  (68.8%;  $M= 28.55 \pm 13.63$ ) with differing prevalence rates in the levels of anxiety which were normal anxiety: 45(31.3%), moderate anxiety  $n=62(43.1\%)$  and severe anxiety:  $n=37(25.7\%)$ . Regarding comorbidities, the Pearson correlation test showed that there was a significant ( $p=0.000$ ) positive relationship between PTSD and depression ( $r=0.379$ ;  $p=.000$ ), PTSD and anxiety ( $r=0.624$ ;  $p=.000$ ), and depression and anxiety ( $r=0.386$ ;  $p=.000$ ) such that increase in one disorder concomitantly led to increase of the other two disorders; hence comorbidity of the three disorders was ascertained. Conclusion: The study asserted the adverse impacts of IPV on women's mental well-being, where the prevalence of PTSD, depression, and anxiety was established. Almost all the women had depressive symptoms; whereas more than half had anxiety and slightly more than a third had PTSD. Regarding the severity levels of anxiety and depression, almost half of the women with depression had severe depression whereas moderate anxiety was more prevalent for those with anxiety. The three disorders were found to co-occur where comorbidities of PTSD and anxiety had the highest probability of co-occurrence. It is thus recommended that mental health interventions with a focus on the three disorders be offered for women undergoing IPV.

**Keywords :** anxiety, comorbidity, depression, intimate partner violence, post-traumatic stress disorder

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